



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED

04 JUL 23 PM 1:11

**CANDIDATE COMMITTEE
COVER PAGE**

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

MACOMB COUNTY
FOR OFFICIAL USE ONLY
MACOMB COUNTY, MICHIGAN

3. This Statement covers From: 1-01-04 to 7-20-04
Mo Day Year Mo Day Year

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

4. Candidate Last Name

CERGET

First Name

STACY

M.I.

K

4a. Office Sought Including District # or Community Served (If applicable)

SHELBY TOWNSHIP SUPERVISOR

4b. County of Residence

MACOMB

5. Committee's Mailing Address

5551 DOUGLAS CT
SHELBY TWP, MI 48315

Area Code and Phone 586 7391892

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address

MARY JO CERGET

53580 SOPHIA

SHELBY TWP, MI 48316

Area Code & Phone

(586) 781 4917

7. Treasurer's Business Address

N/A

Area Code and Phone ()

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)

N/A

Area Code and Phone ()

9. TYPE OF STATEMENT

9a. ☒ Pre-Election

OR

9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☒ Primary

☐ General

☐ Convention

☐ School

☐ Special

☐ Caucus

Date of Election, Convention or Caucus

Aug 3 2004
Month Day Year

9c. ☒ Annual Statement (2004 Coverage Year)

9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)

9e. ☐ Dissolution of Candidate Committee

Effective Date of Dissolution

Month Day Year

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper

MARY JO CERGET

Type or Print Name

Signature

Date

7 20 04
Mo Day Year

Candidate

STACY CERGET

Type or Print Name

Signature

Date

7 20 04
Mo Day Year



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	25950	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$	25950	(18.) \$ 25950
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$		(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	25950	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	-	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	-	(22.) \$
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	23387.16	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$		
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$		
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	23387.16	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$		
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$		(24.) \$
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$		
b. Owed to the Committee (Schedule 1E)	(12b.) \$		
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	0	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	25950	
	(15.) = \$	25950	
15. SUBTOTAL Add lines 13 and 14			
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	23387.16	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	2542.84	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5/3/04		
Name: Jerry Vitale	\$300.00			300 ⁰⁰	300-
Address: 47100 Schoenherr					
5. If over Shelby Twp, MI 48315					
Occupation: Developer					
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person				
	<input checked="" type="checkbox"/> Fund Raiser				
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5/3/04		
Name: Benny Biondo	\$200.00			200 ⁰⁰	200-
Address: 44444 Mound Road					
5. If over Sterling Heights, MI 48313					
Occupation: Developer					
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person				
	<input checked="" type="checkbox"/> Fund Raiser				
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5/3/04		
Name: Dick Wright	\$100.00			100 ⁰⁰	100-
Address: 8800 23 Mile Road					
5. If over Shelby Twp, MI 48315					
Occupation: Engineer					
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person				
	<input checked="" type="checkbox"/> Fund Raiser				
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5/3/04		
Name: Maria Lo Chireo				100 ⁰⁰	100-
Address: 201 Cut Crystal, Shelby Twp, MI 48315					
5. If over \$100.00 cumulative, please provide:					
Occupation: Project Mgr	Employer: MKE Windows				
Business Address: 201 Cut Crystal Dr					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person				
	<input checked="" type="checkbox"/> Fund Raiser				
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				700-	

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137422

2. Committee Name CTE Stacy Cergot

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>5/3/04</u>			
Name: _____ Address: Mike Sorrentino \$100.00 15550 15 Mile 5. If over \$ Clinton Twp, MI 48038 Occupation Developer <u>Self</u> Business Address <u>Same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			100 ⁰⁰	100-	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>5/3/04</u>			
Name: _____ Address: Frank Mancini \$100.00 47858 Van Dyke 5. If over \$100 Shelby Twp, MI 48315 Occupation Developer <u>Self</u> Business Address <u>Same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			100 ⁰⁰	100-	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>5/3/04</u>			
Name: _____ Address: Bill Mosher \$200.00 414 Whims Lane 5. If over \$100. Rochester MI 48306 Occupation Engineer <u>Self</u> Business Address <u>Same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			200 ⁰⁰	200-	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>5/3/04</u>			
Name: _____ Address: Greg Iacobelli \$500.00 51345 Industrial Drive 5. If over \$ Macomb Twp, MI 48042 Occupation Developer <u>Self</u> Business Address <u>Same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			500 ⁰⁰	500-	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				900 ⁰⁰	

Enter this total on
line 3 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5/3/04		
Name: David Filar		\$200.00			
Address: 5500 24 Mile					
5. If over \$100: Shelby Twp, MI 48315					
Occupation: Electrician			Self	200-	200-
Business Address: Same					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5/3/04		
Name: Jim Carabelli		\$100.00			
Address: 54077 Mound					
5. If over \$100.0: Shelby Twp, MI 48315					
Occupation: Politician				100	100-
Business Address: Same					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5/3/04		
Name: Joe Salome					
Address: 4550 23 Mile Shelby Twp					
5. If over \$100.00 cumulative, please provide:					
Occupation: Developer			Self	200	200-
Business Address: Same as above					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5/3/04		
Name: Andrew Borscore					
Address: 4516 Ascot, Oakland Twp					
5. If over \$100.00 cumulative, please provide:					
Occupation: Developer			Self	200	200-
Business Address: Same					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				700-	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name: Matt King	\$100.00	5/3/04			
Address: 1654 South Shore					
5. If over Rochester Hills, MI 48307					
Occupati Landscaper		Self		100	100 -
Business Address Same					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person	<input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name: Fazal Khan	\$500.00	5/3/04			
Address: 5238 Windmill					
5. If over Troy, MI 48085					
Occupati Engineer		Self		500	500 -
Business Address 43345 Schoenher St HTS					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person	<input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name: Gary Sakwa	\$250.00	5/3/04			
Address: 5130 Deep Wood					
5. If over Bloomfield Hills, MI 48302					
Occupation Developer		Self		250	250 -
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person	<input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name: Tony Vettraino	\$100.00	5/3/04			
Address: 6924 Montclair					
5. If over Troy, MI 48085					
Occupation Business Owner Restaurant		Self		100	500 -
Business Address Same					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person	<input checked="" type="checkbox"/> Fund Raiser			
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				950	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY PERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5/3/04		
Name: <input checked="" type="checkbox"/>					
Address: Joseph Farnese	\$500.00		Retired	500	500
5. If over \$100					
Harrison Twp. MI 48045			Retired		
Occupation					
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person		<input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5/3/04		
Name:					
Address: Frank Farnese	\$500.00			500	500
5. If over \$100			Retired		
48338 Jerome					
Shelby Twp, MI 48315					
Occupation					
Retired					
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person		<input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5/3/04		
Name:					
Address: Peter Dinoto	\$500.00			500	500
5. If over \$100			Self		
26565 Hunters					
Chesterfield, MI 48051					
Occupation					
Developer					
Business Address			Same		
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person		<input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5/3/04		
Name:					
Address: Mary Dinoto	\$500.00			500	500
5. If over \$100					
26565 Hunters					
Chesterfield, MI 48051					
Occupation			Retired		
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person		<input checked="" type="checkbox"/> Fund Raiser		
Page Subtotal					
Grand Total of All Schedules 1A					
(Complete on last page of Schedule)					
				2000	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name:			
Address:	Michael Krywko	\$500.00	
5. If over \$100	1615 Stony Creek		
Occupation	Rochester, MI 48307		
Business Address			
Type of Contribution:	<input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name:			
Address:	Therese Krywko	\$500.00	
5. If over \$100.1	1615 Stony Creek		
Occupation	Rochester Mi 48307		
Business Address			
Type of Contribution:	<input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name:			
Address:	Greg Staples	\$500.00	
5. If over \$100.00	32471 Industrial Drive		
Occupation	Madison Heights, MI 48071		
Business Address	Business Owner		
Type of Contribution:	<input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name:			
Address:	Jason Eisenberg	\$100.00	
5. If over \$	31731 Northwestern Hwy Suite 115		
Occupation	Farmington Hills, MI 48334		
Business Address	Developer		
Type of Contribution:	<input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
Page Subtotal			
Grand Total of All Schedules 1A			
(Complete on last page of Schedule)			

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name: <u>Sammy Lo Chiro</u> Address: <u>2001 Cut Crystal Drive</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>Developer</u> Employer: <u>Self</u> Business Address: <u>Same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt: <u>5/3/04</u>	200	200
3. Contribution #2 Name: <u>Simone Mauro</u> Address: <u>57127 Willow Way</u> 5. If over \$100.00 c <u>Washington, MI 48094</u> Occupation: <u>Developer / Engineer</u> Business Address: _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt: <u>5/3/04</u>	300	300
3. Contribution # 3 Name: <u>Nancy Kolinski</u> Address: <u>48600 Van Dyke Shelby Twp. MI 48315</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>Engineer</u> Employer: <u>Self</u> Business Address: <u>48600 Van Dyke Shelby Twp 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt: <u>5/3/04</u>	100	100
3. Contribution # 4 Name: <u>Robert Higgins</u> Address: <u>43345 Schoenherr St. Hts, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>Surveyor</u> Employer: <u>FKA</u> Business Address: <u>Same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt: <u>5/3/04</u>	200	200
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		800	

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137422

2. Committee Name CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/3/04</u> Name: <u>Jim Wilson</u> Address: <u>226 Tourane, Gross Pointe Farms 48236</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Developer</u> Employer <u>Developer Self</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	500	500	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3/3/04</u> Name: <u>David Schmerin</u> Address: <u>31275 Northwestern Hwy Ste 229 Farm Hills MI 48334</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Builder</u> Employer <u>Self</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100	100	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3/3/04</u> Name: <u>Scott Kelly</u> Address: <u>51345 Industrial Dr. Macomb Twp MI 48042</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100	100	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/3/04</u> Name: <u>Brian Gregorich</u> \$100.00 Address: <u>43441 Schoenherr Sterling Heights, MI 84313</u> 5. If over \$100: <u>Architect</u> <u>Self</u> Occupation _____ <u>Same</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100	500	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	800		

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name: Richard Sable Address: 12900 Hall Road Sterling Heights, MI 48313 Occupation: Attorney Business Address: Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt: 5/3/04 PAC Receipt? <input type="checkbox"/> YES \$500.00	500	500
3. Contribution #2 Name: Carl Monaco Address: 48025 Van Dyke, Shelby Twp, MI 48316 Occupation: Builder Employer: Self Business Address: Same Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt: 5/3/04 PAC Receipt? <input type="checkbox"/> YES	100	100
3. Contribution # 3 Name: Leonardo Evola Address: 52660 Turnbury Shelby Twp. MI 48316 Occupation: Cabinet Maker Business Address: Same Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt: 5/3/04 PAC Receipt? <input type="checkbox"/> YES \$200.00	200	200
3. Contribution # 4 Name: Sam Gara-Lato Address: 46719 Hayes, Shelby Twp, MI 48315 Occupation: Day Care Director Employer: Self Business Address: Same Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt: 5/3/04 PAC Receipt? <input type="checkbox"/> YES	200	200
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		1000	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name:					
Address:					
5. If over \$100.00 cumulative, please provide:					
Occupation					
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person		<input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name:					
Address:					
5. If over \$100.00 cumulative, please provide:					
Occupation					
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person		<input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name:					
Address:					
5. If over \$100.00 cumulative, please provide:					
Occupation					
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person		<input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name:					
Address:					
5. If over \$100.00 cumulative, please provide:					
Occupation					
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person		<input checked="" type="checkbox"/> Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				1400	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name:					
Address:	Amy Guzzardo	\$500.00	10/16		
5. If over \$100.00	49332 Golden Lake		46710 Hayes		
Occupation	Shelby Twp, MI 48315		Shelby Twp	500	500
Business Address	Business Owner		Owner		
Type of Contribution:	<input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person		Flower Shop		
	<input checked="" type="checkbox"/> Fund Raiser				
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name:					
Address:	Francesco Salamone	\$500.00	10/16		
5. If over \$100.00	52476 Covecreek			500	500
Occupation	Macomb, MI 48042		Self		
Business Address	Architect				
Type of Contribution:	<input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person				
	<input checked="" type="checkbox"/> Fund Raiser				
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name:					
Address:	Anthony Vettraino	\$400.00	10/16		
5. If over \$100.00 cu	6924 Montclair			400	500
Occupation	Troy, MI 48085		Self		
Business Address	Business Owner				
Type of Contribution:	<input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person				
	<input checked="" type="checkbox"/> Fund Raiser				
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name:					
Address:	Dante Bencivegna	\$400.00	10/16		
5. If over \$100.00 c	740 Oakleigh Dr.			400	400
Occupation	Bloomfield, MI 48302		Self		
Business Address	Insurance Agency Owner				
Type of Contribution:	<input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person				
	<input checked="" type="checkbox"/> Fund Raiser				
Page Subtotal				1800	
Grand Total of All Schedules 1A (Complete on last page of Schedule)					

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Address: John Farnese 26550 Autumn Lake Drive Chesterfield, MI 48051		<u>6/16/04</u>			
5. If over \$100.00 Occupation <u>Retired</u>				500	500
Business Address Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #2 Name:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Address: Vince DiLorenzo 46719 Hayes Shelby Twp, MI 48315		<u>6/16/04</u>			
5. If over \$100.00 c Occupation <u>Developer</u>				500	500
Business Address Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 3 Name:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Address: Brian Gregorich 26445 Woodland Chesterfield Twp, MI 48051		<u>6/16/04</u>			
5. If over \$100.00 cun Occupation <u>Architect</u>				400	500
Business Address Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 4 Name:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Address: Angie Tinervia 46869 Hayes Shelby Township, MI 48315		<u>6/16/04</u>			
5. If over \$100.00 Occupation <u>Business Owner - Dressshop</u>				500	500
Business Address <u>Same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				1900	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Address: Frank DiLorenzo 978 Knob Creek Dr. Rochester, MI 48306 Occupation: Builder			\$500.00	500	500
Business Address Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #2 Name:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Address: Rosalie DiLorenzo 978 Knob Creek Dr. Rochester, MI 48306 Occupation: Shop Owner			\$500.00	500	500
Business Address Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 3 Name:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Address: Pearlann Mocerri-Heinzman 38331 Ammerst Clinton Twp. MI 48038 Occupation: Administrative Assistant			\$500.0	500	500
Business Address Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 4 Name:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Address: Antoinette DiLorenzo 978 Knob Creek Drive Rochester, MI 48306 Occupation: Jewellery			\$500.00	500	500
Business Address Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				2000	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name: Mary Garafalo Address: 46793 Hayes Shelby Twp, MI 48315 5. If over \$100 Business Owner Occupation: <u>Self</u> Business Address: <u>Same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt: <u>6/16/04</u> \$500.00	500	500
3. Contribution #2 Name: <u>Jim Tinervia</u> Address: <u>40793 Hayes Shelby Twp. MI 48315</u> 5. If over \$100.00 cumulative, please provide: <u>Best. Owner</u> Occupation: <u>Self</u> Business Address: <u>Same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt: <u>6/16/04</u>	500	500
3. Contribution # 3 Name: Maria Aluia Address: 5889 Jackelyn Ct. Washington, MI 48094 5. If over \$100 Resident Occupation: <u>Retired</u> Business Address: <u>Same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt: <u>6/16/04</u> \$500.00	500	500
3. Contribution # 4 Name: Patrick Stewart Address: 49480 Van Dyke Utica, MI 48317 5. If over \$100.0 Developer Occupation: <u>Self</u> Business Address: <u>Same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt: <u>6/16/04</u> \$500.00	500	500
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		2000	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name: Paula Filar		6/16/04			
Address: 5500 24 Mile Shelby Twp. MI 48315					
5. If over \$100.00 cumulative, please provide:					
Occupation: Self				200	200
Business Address:					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name: Tony LoChirco		6/16/04			
Address: 49480 Van Dyke					
5. If over \$100.00					
Occupation: Utica, MI 4317					
Business Address: Developer SAME				500	500
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name: Angie LoChirco		6/16/04			
Address: 49480 VanDyke					
5. If over \$100.00					
Occupation: Utica, MI 48317					
Business Address: Resident				500	500
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name: Joe Vaglica		6/16/04			
Address: 57210 Stonebriar					
5. If over \$100.00					
Occupation: Washington Twp, MI 48094					
Business Address: Engineer				200	200
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
Page Subtotal				1900	
Grand Total of All Schedules 1A (Complete on last page of Schedule)					

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137432
2. Committee Name CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name: Sebastian Biondo Address: 56199 Summit Dr. Shelby Twp., MI 48316 Occupation: Developer Business Address: Same Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>6/16/04</u> \$500.00 5. If over \$100.00: <u>Self</u>	500	500
3. Contribution #2 Name: Michele LoChirco Address: 2001 Cut Crsytal Drive Utica, MI 48087 Occupation: Apartment Owner Business Address: Same Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>6/16/04</u> \$500.00 5. If over \$100.00: <u>Self</u>	500	500
3. Contribution # 3 Name: Orpha Gorsline Address: 53478 Graland Shelby Twp, MI 48316 Occupation: Resident Business Address: Same Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>6/16/04</u> \$500.00 5. If over \$100: <u>Retired</u>	500	500
3. Contribution # 4 Name: Maria Bartolotta Address: 55619 Monroe Shelby Twp, MI 48316 Occupation: Resident Business Address: Same Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>6/16/04</u> \$500.00 5. If over \$100.00: <u>Self</u>	500 500	500
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		2000	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name:					
Address:	Abdo Saleh	\$500.00			
5. If over \$100.00 cumul:	48548 Roma Velly Circle G-50				
Occupation	Utica, MI 48317				
Business Address	Resident				
Type of Contribution:	<input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name:					
Address:	Debra Omar	\$500.00			
5. If over \$100.00 cumul:	48548 Roma Valley Cir G-50				
Occupation	Utica, MI 48317				
Business Address	Resident				
Type of Contribution:	<input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name:					
Address:	Sandra Rose	\$500.00			
5. If over \$100.00 cu	53478 Garland				
Occupation	Shelby Twp., MI 48316				
Business Address	Resident				
Type of Contribution:	<input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt			
Name:					
Address:	Francesco Bartolotta	\$500.00			
5. If over \$100.00 cumi	55619 Monroe				
Occupation	Shelby Township, MI 48316				
Business Address	Developer				
Type of Contribution:	<input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				2000	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/1/14</u></p> <p>Name: _____</p> <p>Address: <u>Nino LoChirco</u> \$500.00</p> <p><u>2001 Cut Crystal Drive</u></p> <p>5. If over <u>Utica, MI 48087</u></p> <p>Occupation: <u>Developer</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		500	500
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>			
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>			
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>			
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		500	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 137422
2. Committee Name CTE STACY CERGET

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>Kinko's</u> Address <u>41150 Garfield</u> <u>Clinton Twp, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Tickets</u> <u>OE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/20</u>	<u>3.29</u>
Expenditure #2 Name <u>Office Max</u> Address <u>45320 Utica Park Blvd</u> <u>Utica, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Supplies</u> <u>OE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/8</u>	<u>16.68</u>
Expenditure #3 Name <u>US Post Office</u> Address <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/5</u>	<u>55.50</u>
Expenditure #4 Name <u>Office Depot</u> Address <u>44835 Schoenherr</u> <u>St. Hts, MI 48313</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Supplies</u> <u>OE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/14</u>	<u>49.13</u>
Expenditure #5 Name <u>Eastpointe Printing</u> Address <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/3</u>	<u>200-</u>
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>324.60</u>

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 137422
2. Committee Name CTE STACY CERGET

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>Boeci Salor</u> Address <u>44509 Schoenher</u> <u>St. Hts MI 48313</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Pictures</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>2/20</u>	<u>129.84</u>
Expenditure #2 Name <u>Patrick Studios</u> Address <u>32211 Mound</u> <u>Warren, MI 48092</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Pictures for</u> <u>LIT.</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>2/20</u>	<u>63.53</u>
Expenditure #3 Name <u>Leonas Photos</u> Address <u>49148 Driftwood</u> <u>Shelby Twp, MI</u> <u>48317</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Photos</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/27</u>	<u>65.00</u>
Expenditure #4 Name <u>Leona's Photos</u> Address <u>49148 Driftwood</u> <u>Shelby Twp, MI 48317</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Photos</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/26</u>	<u>50-</u>
Expenditure #5 Name <u>Little Green Apple</u> Address <u>8150 23 Mile</u> <u>Shelby Twp MI 48316</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Thank You's</u> <u>G1</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/23</u>	<u>28.59</u>
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>336.96</u>

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 137422
2. Committee Name CTE STACY LERGET

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>Kinkos</u> Address <u>133 S Main St. Rochester</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>Tickets</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/23</u>	<u>55.73</u>
Expenditure #2 Name <u>Villa Pennas</u> Address <u>46800 Hayes St. Hts MI 48313</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Food</u> <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/3</u>	<u>\$1494.60</u>
Expenditure #3 Name <u>Romeo Wash. Chamber of Commerce</u> Address <input type="checkbox"/> Fund Raiser	Purpose: <u>Golf Tee</u> <u>NF</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/1</u>	<u>100 -</u>
Expenditure #4 Name <u>CTE Candice Miller</u> Address <u>PO Box 182152 Shelby Twp, MI 48318</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>NF</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/1</u>	<u>100 -</u>
Expenditure #5 Name <u>CTE Paula Filar</u> Address <u>3500 24 Mile Shelby Twp, MI 48315</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>NF</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/1</u>	<u>100 -</u>
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>1550.33</u>

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 137422
2. Committee Name CTE STACY CERGET

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>EASTPONTE PRINTING</u> Address <u>24012 Broadbeck</u> <u>Warren MI 48089</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/17</u>	<u>1700</u>
Expenditure #2 Name <u>Leona's Photographs</u> Address <u>49148 Driftwood</u> <u>Shelby Twp. MI 48317</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Photos Family</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/10</u>	<u>113.10</u>
Expenditure #3 Name <u>EASTPONTE PRINTING</u> Address <u>24012 Broadbeck</u> <u>Warren MI 48089</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/30</u>	<u>1886.40</u>
Expenditure #4 Name <u>US Post Office</u> Address <input type="checkbox"/> Fund Raiser	Purpose: <u>Mail</u> <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/21</u>	<u>3375.46</u>
Expenditure #5 Name <u>Mass Mailing</u> Address <u>PO Box 1299</u> <u>St. Hts MI 48311</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Mail</u> <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/19</u>	<u>748.22</u>

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7823.18

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 137422
2. Committee Name CTE STACY CERGET

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>Mass Mailing</u> Address <u>PO BOX 1299</u> <u>St. Hls MI 48311</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Mail</u> <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/9</u>	<u>512.87</u>
Expenditure #2 Name <u>Mass Mailing</u> Address <input type="checkbox"/> Fund Raiser	Purpose: <u>Mail</u> <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/2</u>	<u>753.64</u>
Expenditure #3 Name <u>Vahlior Signs</u> Address <u>308 North Ave.</u> <u>Mt Clemens, MI 48043</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Signs</u> <u>SA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/10</u>	<u>5042.42</u>
Expenditure #4 Name <u>RL Communications</u> Address <u>Southfield, MI</u> <u>7</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Consultant</u> <u>CN</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/30</u>	<u>2645.00</u>
Expenditure #5 Name <u>C + G Newspaper</u> Address <u>Warren, MI 48098</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>News Ass</u> <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/1</u>	<u>772.80</u>
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>9726.73</u>

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number

137422

2. Committee Name

CTE STACY CERGET

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
<p>Expenditure #1</p> <p>Name <u>Hanon Printing</u></p> <p>Address <u>10652 Northend</u> <u>Ferndale, MI 48220</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Printing</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	7/16	748.80
<p>Expenditure #2</p> <p>Name <u>Rosebuds Ristorante</u></p> <p>Address <u>Hayes, Shelby</u> <u>Twp</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Food</u> <u>FE</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	6/15	\$1400-
<p>Expenditure #3</p> <p>Name <u>Oriental Trading</u></p> <p>Address</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Gifts</u> <u>GI</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	6/15	345.35
<p>Expenditure #4</p> <p>Name <u>US Post Office</u></p> <p>Address</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Mail</u> <u>MA</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	7/21	92.00
<p>Expenditure #5</p> <p>Name <u>Lowe's</u></p> <p>Address <u>Clinton Twp</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Sign Supplies</u> <u>SA</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	6/23	119.82
<p>Subtotal this page</p> <p>Grand Total of all Schedules 1B</p> <p>(Complete on last page of Schedule)</p>			<p>2705.97</p>

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number

137422

2. Committee Name

CTE STACY CENLGBT

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>Lowe's</u> Address <input type="checkbox"/> Fund Raiser	Purpose: <u>Sign Posts</u> <u>SA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/23</u>	<u>681.99</u>
Expenditure #2 Name <u>Meijer</u> Address <input type="checkbox"/> Fund Raiser	Purpose: <u>Supplies</u> <u>OE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/29</u>	<u>26.45</u>
Expenditure #3 Name <u>US Postal</u> Address <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/14</u>	<u>118.95</u>
Expenditure #4 Name <u>US Postal</u> Address <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/13</u>	<u>92.00</u>
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		

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Grand Total of all Schedules 1B
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919.39

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MICHIGAN DEPARTMENT OF STATE
Bureau of ElectionsFUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number

137422

2. Committee Name

CTE STACY CERGET

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held

4 18 04
Month Day Year4. Number of Individuals Attending
or Participating (whichever is
greater)

60

5. Type of Fund Raising Activity

Pre Election

6. Address and Name (If any) of
the place where the activity was
heldVilla Penna's
Hayes St. Hts MI☐ Private Residence

7. Total Contributions of \$20.00 or less

8. Total Contributions of \$20.01 or more

9. SUBTOTAL (Add lines 7 and 8)

10. Other Receipts

11. Gross Receipts (Add lines 9 and 10)

12. Total Cost of Event*

13. ☐ Check if event was a joint fund raiser and complete the following:*Includes In-Kind Contributions and All
Expenditures Made For the Event

Co-Sponsor(s)

Contribution Split
(%)Expenditure Split
(%)

• The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.

• Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.

• Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137422
2. Committee Name CTE STACY CERBET

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>6</u> <u>15</u> <u>04</u> Month Day Year	4. Number of Individuals Attending or Participating (whichever is greater) <u>40</u>	5. Type of Fund Raising Activity <u>Pre-Election</u>	6. Address and Name (If any) of the place where the activity was held <u>Rosebuds Ristorante</u> <u>46915 Hayes, Shelby Twp, MI</u> <input type="checkbox"/> Private Residence
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7. Total Contributions of \$20.00 or less —
8. Total Contributions of \$20.01 or more 15100
9. SUBTOTAL (Add lines 7 and 8) 15100
10. Other Receipts —
11. Gross Receipts (Add lines 9 and 10) 15100
12. Total Cost of Event* 1400
13. ☐ Check if event was a joint fund raiser and complete the following:

*Includes In-Kind Contributions and All
Expenditures Made For the Event

Co-Sponsor(s)

Contribution Split
(%)

Expenditure Split
(%)

The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.

Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-1K), Itemized Expenditures Schedule (1B) and the Summary Page.

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.